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ANNEXATION OF HAWAII.

SPEECH

OF

HON. RICHARD A. WISE,
OF VIRGINIA,

IN THE

HOUSE OF REPRESENTATIVES,

TUESDAY, JUNE 14, 1893.

WASHINGTON.

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Mr. W. A. Smith

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SPEECH
OF
HON. RICHARD A. WISE.

The House having under consideration the joint resolution (H. Res. 239) to provide for annexing the Hawaiian Islands to the United States—

Mr. WISE said:

Mr. SPEAKER: In the limited time that has been allotted me to discuss this question I will be compelled to confine myself to only a few points. I confess that up to a recent date I was opposed to the annexation of any more territory by the United States, but a condition of things has arisen in connection with the war with Spain that in my opinion makes the annexation of Hawaii a military necessity, and I shall vote for it just as I voted to give the soldiers in camp the right to vote in our elections and as I voted for the war-revenue bill, in spite of the fact that it had been hampered by certain Senate amendments to which I am opposed, some of which I deemed inexpedient, and one of which I regarded as a violation of a principle which was advocated by the sound-money people of this country in 1896.

The responsibility for this latter amendment, namely, the compulsory coinage of one and one-half million dollars of silver monthly, I shall leave to those who fathered it. These measures are demanded by the exigencies of the times, and, being necessary to the successful conduct of the war and the upholding of the hands of the Administration now, I vote for them. When we recognize that Hawaii is only about 2,100 miles from our Pacific coast, and that the heaviest battle ship, steaming at the rate of 15 miles an hour, can reach it in less than six days, and that it took more than that time for George Washington to move his army from the neighborhood of Philadelphia to Yorktown in 1781, we can see how conditions have changed since then and how thoroughly fallacious it is to quote, as others have done, the sayings of Washington about the acquirement of other territory. The principles enunciated by Washington are correct, but the application of the principles vary under varying conditions. Since his day we have acquired much territory, some by conquest and some by purchase.

Alaska is practically farther away from us than Hawaii. At any rate, Mr. Speaker, it appears to be a well-settled fact that the judgment of the American people demands this annexation, and as one of their representatives, since they are in favor of the verdict, I am not disposed to set myself up as the "stubborn twelfth juror."

Naval battles were heretofore fought by ships with sails, that could be absent for years from their base of supply; to-day the most powerful battle ship is unable to exert her power either for

offense or defense unless supplied with coal. It is said we have by treaty a coaling station in Hawaii which is sufficient to supply our needs in that direction.

Will it not be as hard, or, indeed, harder, for us to defend this station in time of war should other nations assail it as it would be for us to defend the whole island as part of our territory? But, Mr. Speaker, all these questions have been gone over and more ably discussed than it is possible for me to do. I will confine myself solely to one objection which has been raised in opposition to the annexation of this territory, namely, the existence of leprosy there.

It has been said that we will be annexing a colony of lepers to spread the disease over the United States. This shows the great ignorance on the part of some people in regard to this disease. What is leprosy? Osler, who is the author of one of our best and most modern works on medicine and who stands as high as anyone else in medical authority, defines it to be—

A chronic infectious disease caused by the bacillus lepræ, characterized by the presence of tubercular nodules in the skin and mucous membranes (tubercular leprosy) or by changes in the nerves (anæsthetic leprosy). At first these forms may be separate, but ultimately both are combined, and in the characteristic form there are disturbances of sensation.

The disease is widespread and there is a popular belief that it is on the increase.

Osler says:

It is one of the oldest of known diseases. At present it prevails widely particularly in hot countries. In India it is estimated that there are over 250,000 lepers. In Europe, where it prevailed in the Middle Ages, it has become almost unknown, except in Norway and the Orient. It exists in the Gulf States and extensively in Mexico.

At Key West, Berger states that there are 100 cases, and Blanc found 40 cases in New Orleans. In the Northwestern States a few cases exist among the Norwegian and Icelandic settlers. On the Pacific coast cases are seen not infrequently among the Chinese.

An endemic focus is at Tracadie, New Brunswick; a few cases are also met with in Cape Breton, Nova Scotia. At Tracadie, which is on a bay of the Gulf of St. Lawrence, the disease is limited to two or three counties which are settled by French Canadians. The disease was imported from Norway about the end of the last century. The cases are confined in a lazaretto, to which place they are sent as soon as the disease is manifest. I made a visit to the settlement two years ago with a medical officer, A. C. Smith, of Chatham, at which time there were only eighteen patients in the hospital. It is interesting to note that the disease was gradually diminished by segregation; formerly there were over forty under surveillance.

The disease attacks all classes and persons of all ages. It is probably communicated by contagion. Inoculation was successfully performed by Arning in a Hawaiian convict. Graham, who, some years ago, carefully investigated the Tracadie settlement, came to the conclusion that the disease was very probably transmitted by contagion, and A. C. Smith, the present medical officer, tells me that he knows of no facts which are opposed to that view. It is, however, only contagious in the same sense as syphilis, and just as accidental contamination with this virus is extremely rare so it is with leprosy. The closest possible contact may take place for years, as between parent and child, without transmission, and not one of the Sisters of Charity who have for more than forty years so faithfully nursed the lepers at Tracadie has contracted the disease.

It is difficult to explain the rapid spread of the disease in the Sandwich Islands on any other view than contagion, and yet it is strange that there is no evidence of a primary lesion or external sore comparable to that of syphilis. Morrow states that—

In the immense majority of cases the disease is propagated by sexual congress. The disappearance of the disease in the Middle Ages no doubt resulted from isolation enforced at that time. The disease had possibly, in some instances, been transmitted by vaccination. Hereditary transmission can not be excluded, and there is no good reason why the disease should not be communicated, as in syphilis, from parent to child.

Hansen, of Bergen, first discovered this organism, which has many points of resemblance to the bacillus tuberculosis, but can be differentiated from it. It occurs in extraordinary numbers in the tuberculous tissue. It has been cultivated successfully (Bales), but inoculation experiments on animals have been negative.

I quote this high authority, as it clearly defines the disease much better than I could. My object is to show that, while it is a disease that is hard to cure by medicine and which is very chronic, running from three to twenty-two years in the tuberculated cases and in the anæsthetic cases running from five to thirty-five years, its ability of contagion is very slight.

The words infection and contagion here, it is well to say, can not well be separated and defined differently in the light of the modern germ theory. A man may take into his system a germ that has emanated from the body of another and become infected through the atmosphere or by the water he drinks, or he may by actual contact with a person be infected by the germ direct. These are confusing terms for many, but they may be regarded almost as convertible.

It is not my intention to give a dissertation upon medicine, but simply to state that the most enlightened medical opinions of today show that by proper cleanliness and nutritious food and the isolation of infected subjects this disease may be stamped out. For years past in the Hawaiian Islands a colony for the segregation of lepers has been established at Molokai; but while the number of lepers on these islands has diminished to a considerable extent under this system, the safeguards which have been thrown around the colony to prevent the spread of the disease have been defective in many respects. Friends and kokuas (or helpers) have been permitted to associate on the most intimate terms with the lepers. These kokuas receive no rations from the Government, and in many instances are reported as having tried to catch the disease that they might be fed and clothed and furnished with tobacco free of cost as the lepers were.

In an article on "Leprosy in Hawaii," published in Berlin at the time of the recent international leprosy conference, and written by Dr. J. Ashburn Thomason, of Sydney, he says:

As the good management of the settlement became better known and natives began to see that lepers, once deported, had no cares, but were fed, clothed, and furnished with tobacco, without any need to work for the rest of their lives, many persons actually sought to acquire the disease in order that they might share that fortunate lot. So that while all natives would without hesitation, and apparently without noticing the unsightly and sometimes disgusting aspect presented by the lepers, continue to live in ordinary household intimacy with them, there sprung up a number who are reputed to have actually done their best to acquire leprosy.

As regards natives outside the settlement, Mr. Meyer told me that he had recently reproved a dozen men whom he found eating out of the same poi bowl with a tuberculated leper advanced in illness (poi being eaten by dipping the fingers in the sticky mass and sucking them); but the only answer he got from the party was given by one who at last said, sententiously, "Do you call it a bad disease? I say it is good. If I catch it, what then? I shall go to the settlement and work no more." As regards natives already within the settlement, though not affected, Dr. Swift, at that time resident physician, wrote to the board in 1892: "Let it be understood (for I can prove it) that to be a leper is a desideratum; if not on the outside, it is so at the settlement;" and, "Let me state that I can at any time get twenty or twenty-five Kokuas to submit to inoculation with a view of contracting the disease, to the end that they may be endowed with the privileges and supplied with the rations of the regular leper."

Strange to say, in spite of these disgusting facts and the laxity of the segregation of the lepers, only a very few of these Kokuas

contracted the disease. The original holders of the territory on which the settlement is located, known as Kamaainas, and who live there still on their property, have been singularly exempt from the disease, although they associate constantly with the lepers. The report of the American representative to the Berlin conference has not yet been printed, but I have ascertained that said report will confirm the idea that leprosy may be stamped out by proper quarantine regulations. Much confusion existed as to the true character of this disease prior to the isolation of the bacillus lepræ. Now its real nature is understood, and its extermination or confinement to a few localities may be well assured by proper legislation and governmental control.

Despite the large number of lepers in India it was stated by Dr. Phineas S. Abraham, of London, before the Berlin conference, as follows:

In 1889 Sir James N. Dick, K. C. B., the director of the medical department of the navy, informed me that "not a single case of leprosy among the officers or men of the navy could be traced in the office," and at the same date the late Sir Thomas Crawford, K. C. B., director of the army medical department, could discover but little evidence of the disease among the British troops. Only one case, indeed, had come to light, viz, in a soldier taken in Madras, whose father was an Irishman and mother a native. Sir Thomas Dick has also, upon the present occasion, kindly investigated the matter, and he has been able to state again that no case of leprosy has ever occurred in the navy.

The present director-general of the army medical department has also been good enough to have the records of the service again examined, and it appears that—

During the past ten years only one case of leprosy has been reported to have occurred among the British troops and non-European troops (exclusive of native troops) in India. This case appears in the annual report for the Madras command for the year 1890. It is probably the one referred to above.

I could multiply these statistics to a great extent, but I have not time, nor will I worry you with such quotations. I will conclude by quoting the following.

In the transactions of the American Dermatological Association for 1883 a report by Drs. Fox and Graham is given which embodies the results of their combined investigations. The following ten propositions were submitted by them as their deductions from the facts observed:

First. Leprosy is a constitutional disease, and in certain cases appears to be hereditary.

Second. It is undoubtedly contagious by inoculation.

Third. There is no reason for believing that it is transmitted in any other way.

Fourth. Under certain conditions a person may have leprosy and run no risk of transmitting the disease to others of the same household or community.

Fifth. It is not so liable to be transmitted to others as is syphilis in its early stages. There is no relation between the two diseases.

Sixth. Leprosy is usually a fatal disease, its average duration being from ten to fifteen years.

Seventh. In rare instances there is a tendency to recover after the disease has existed for many years.

Eighth. There are no valid grounds for pronouncing the disease incurable.

Ninth. Judicious treatment usually improves the condition of the patient and often causes a disappearance of the symptoms.

Tenth. There is ground for the hope that an improved method of treatment will in time effect the cure of leprosy, or at least that it will arrest and control the disease.

Walter Wyman, M. D., Supervising Surgeon-General United States Marine-Hospital Service, in the Medical News of June 16, 1894, in an article on the national control of leprosy, says:

National control of leprosy within the United States has been frequently advocated, particularly by State and municipal boards of health when finding such cases upon their hands and desirous of being relieved of their care. The arguments for such control, of course, are based upon the presumption of the contagiousness of the disease (even though moderately contagious), and also upon the claim that where no segregation of cases or no supervision of cases not colonized is enforced the disease gradually increases in prevalence and that where segregation and colonization have been enforced the disease has been made to disappear.

Granted that the danger of contagion is small; granted, in the language of another, that a case of leprosy within a family should be regarded with less concern in its relation to the health of the remaining members of the family than a case of tuberculosis; granted that the disease appears chiefly among the lower classes. In the movement which is now only near the starting point, but which promises to be a controlling movement, and which will mark the close of the present century and the beginning of the next, so far as medical science is concerned, as distinctly as any other evidence of progress in the healing art (I refer to the settled resolution to exterminate every contagious disease), it would appear to be incumbent on the profession to leave nothing undone to exterminate this, together with other communicable diseases. Now, with regard to national control, there are two considerations involved.

First. Does the right of national control exist?

Second. If it does, how may that right be exercised?

Concerning the first consideration, I find a difference of opinion among eminent medical men with whom I have conversed, based upon their different views regarding the Constitution of the United States. A strict constructionist will inform you that the United States Government can only legislate in accordance with powers expressly delegated by the Constitution, and that the general-welfare clause of the Constitution applies as a qualifying clause to the specified prerogatives—that the latter are only granted when necessary for the general welfare.

The Doctor says again:

For this purpose, and that Congress may be assured that the medical profession and sanitary officers had not acted upon insufficient premise, it is suggested that a leprosy commission should be appointed, of three or five members, to make report upon the prevalence of leprosy in the United States and the necessity and proper method of its control. A preliminary bill might be introduced, empowering the President to appoint such a commission, and as the success of the bill would be enhanced if it called for an additional appropriation, there might be included a provision setting aside a portion of what is known as the "epidemic fund" to meet the expense of this commission. Whether a national leper hospital would be the result of this action or not, a commission of this character would cause a sense of relief to the people of the United States, whatever its conclusions, either affirmative or negative, as to such an establishment. As for myself, I believe that leprosy should be under national control.

Mr. Speaker, I heartily concur in the ideas expressed by Dr. Wyman, and I think this Congress should at once take measures to pass such a bill. I also favor a national quarantine law as the one method by which we can prevent and control the spread of any infectious diseases in the United States. I believe, sir, that our forefathers in constructing the Constitution gave us under the general-welfare clause ample powers to protect the people against disease. I am not one of those who believe in that parietic view of the Constitution that is taken by certain "statesmen" whom we find here crying out for a crippled and narrow-minded construction of that instrument. We are now truly one people, and the Constitution is sufficiently elastic to protect us in every way.

By taking a few of the islands of the sea we are but extending our pickets for the protection of our homes. Along with the military features of this extension I have particularly dwelt with this



subject of leprosy, as it is much misunderstood by our people. It is a loathsome disease, but not beset with the horrors with which it is painted. I have said nothing that is original, but I believe it all to be true, in the light of modern medical knowledge. It may be well for people to know it, and to disabuse their minds of the scarecrow which some people have attempted to make of it. The power, the energy, and the inventive genius of the United States I believe is capable to meet any emergency and protect itself and its people against any conditions that may hereafter arise. Let us use this power for the good of the people in every way, and let us, in the light of modern science, adopt an advanced and liberal policy whereby we may overwhelm our enemies, whether they come as martial hosts in all the panoply of war or in the insidious forms of disease. I will add that it is estimated there are about 250 lepers in the United States.

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